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OCT 18 2004

WENDY W. KOBA, ESQ.**Fax**

Company: USPTO

From: Wendy W. Koba

Attention: Daniel K. Lam

Pages including cover sheet: 13

Fax No.: 703-872-9306

Date: October 18, 2004

Re: Serial No. 09/760,585

☒ Urgent ☐ Please review ☐ Please Comment ☐ Please Reply ☐ For your information

Case Name: Brush 1999-0461

Serial Number: 09/760,585

Filing Date: January 16, 2001

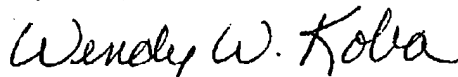
Examiner: Daniel K. Lam

Title: Intelligent Peripheral Concentrator

Please amend by Preliminary Amendment:

1. Transmittal Form (1 page)
2. Certificate of Transmission under 37 CFR 1.8 (1 page)
3. Claims as Amended (1 page)
4. Amendment (9 pages)

Respectfully submitted,



Wendy W. Koba, Esq.

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/760,585
Filing Date	1/16/2001
First Named Inventor	Brush
Art Unit	2667
Examiner Name	Daniel K. Lam
Attorney Docket Number	1999-0461

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Fax Cover sheet 2. Cert. of transmission 3. Claims as Amended
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Wendy W. Koba, Esq.		
Signature	Wendy W. Koba		
Printed name	Wendy W. Koba		
Date	10/18/2004	Reg. No.	30509

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	Wendy W. Koba	
Typed or printed name	Wendy W. Koba	Date 10/18/2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/97 (09-04)

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Certificate of Transmission under 37 CFR 1.8

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on 10/18/2004
Date

Wendy W. Koba
Signature

Wendy W. Koba
Typed or printed name of person signing Certificate

30509
Registration Number, if applicable

610-346-7112
Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

1. Fax Cover Sheet
2. Claims as Amended
3. Amendment

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**RECEIVED
CENTRAL FAX CENTER****OCT 18 2004****IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE**CASE Brush 1999-0461SERIAL NO. 09/760,585GROUP ART UNIT 2667FILED January 16, 2001EXAMINER Daniel K. LamTITLE Intelligent Peripheral Concentrator

COMMISSIONER OF PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

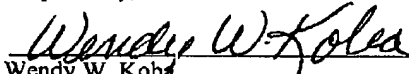
SIR

Enclosed is an amendment in the above-identified application:

☒ No additional fee is required, as shown below.**CLAIMS AS AMENDED**

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS FOR FEE PURPOSES	<u>12</u>	MINUS	<u>20</u>	<u>0</u>	X \$18	<u>0</u>
INDEPENDENT CLAIMS	<u>2</u>	MINUS	<u>4</u>	<u>0</u>	X \$88	<u>0</u>
MULTIPLE DEPENDENT CLAIM(S) First presented with this amendment, if applicable					X \$300	<u>0</u>
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ <u>0</u>

Respectfully,


Wendy W. Koba
Reg. No. 30509
Attorney for Applicant(s)
610-346-7112Date: 10/19/2004